POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	P5	66621	1/5
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	unmb	08236	1-27-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
—	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

BEST AVAILABLE COPY

Claim	Date		Claim	Date		Claim	Date
1			51			101	
...			52			102	
			53			103	
			54			104	
			55			105	
			56			106	
			57			107	
			58			108	
			59			109	
			60			110	
			61			111	
			62			112	
			63			113	
			64			114	
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			66			116	
			67			117	
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			69			119	
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			73			123	
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			81			131	
32			82			132	
33			83			133	
34			84			134	
35			85			135	
36			86			136	
37			87			137	
38			88			138	
39			89			139	
40			90			140	
41			91			141	
42			92			142	
43			93			143	
44			94			144	
45			95			145	
46			96			146	
47			97			147	
48			98			148	
49			99			149	
50			100			150	

If more than 150 claims or 10 actions
staple additional sheet here

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